File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

IA ETHICS AND CAMPAIGN DISCLOSURE BU

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE 2

2010 JAN -7 PM 12: 06

COMMITTEE NAME (Must be same as on Statement of Organ	nization)			
IMPORTANT: Indicate by # type of committee you are reporting for: [(1)Statewide/Legislative/Judge Standing for Retention Candidate (2) (4)County Central Committee (5)County Candidate (6)City Candid)State PAC (3)State Party ate (7)School Board or Other Politic	DI (Rev		SCLOSURE EPORT
Subdivision Candidate (8) County PAC (9) City PAC (10) School B 11) Local Ballot Issue	oard or Other Political Subdivision PA	` 1.01.0	ffice Use Only	9188
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)	Scann	n.# ed In MVW ned	
Office Sought	District (if Senate or House)	Audite	ed	
Late reports are subject to possible civil and criminal penalties. Pursand the chairperson, for any other type of committee, is the individue of a committee of Penalties. Pursand the chairperson filing report	suant to lowa Code section 68B.32A al responsible for filing timely and accompany to the section 68B.32A and accompany to	ccurate reports.	te, for a candidate - 6 - 20 / 6 DATE SIGNE	<u>0 </u>
AM FILING A Jan 1 to Wee, 31, 2009 (report date)	REPORT FOR (1) ELECTION Indicate by	1/2)NON-ELE # 2	CTION YEAR.	
CHECK IF AMENDMENT TO REPORT DATED	-	Local Committe	es, enter Date of	Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)		County & Local which Election	Committees, ente	r County in
STATEMENT OF CASH ON HAND				
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first	al of all funds held by the	\$ _	1,020	, 75
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the ca	al of all funds held by the	\$	1,020	, 75
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the case of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule)	al of all funds held by the ash on hand at the end st report filed.)		7	6
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the case of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD. Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F)	al of all funds held by the ash on hand at the end st report filed.)		1,020 7 -1,127	6
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For Instructions, See Back of Form

DISCLOSURE BOARD.

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	TO C (if a	ATIONSHIP ANDIDATE* applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
6-19-09	ID#	Uniterrised Contributions from sale of food at Summer on Square fundraiser on 6-18-09		\$595,50	· /
6-19-09	ID# CK#	Replacement of Change used for about named event		60.00	
8-6-09	ID# CK#	Uniterized Contributions from sale of baked goods + produce at annual O.S. Bake Sale	·	3 16,50	
8-6-09	ID# CK#	Replacement of change used for above-named event		50.00	
8-6-09	ID#	Carol Thomas 309 S. East St. Corydon, Ja. 50060		10.00	-
8-6-09	ID# CK#	Ronnie Voty 600 S. Franklin Conydon, Ja. 50060		15,00	7
8-6-09	ID# CK#	Russ Danielsen 306 W. Jefferson Corydon, Ja. 50060		25,00	~
8-6-09	ID# CK#	Lorene Havner 413 E. State Conydon, Sa. 50060		5.00	i/
8-12-09	ID# CK#	Floris Snyder 511 E. Jackson Conydon, Ja. 50060		25.00	V
8-26-09	ID# CK#	City of Congdon 205 5. East St. Congdon La 50060 Refund of 's herital fee due to Cancellation of	f fall	25.00	
		fundraiser SUB-	TOTAL	11147 65	

TOTAL (if last page of this schedule)

SCHEDULE Α

(Rev. 07/03)

MONETARY

RECEIPTS

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTEE NAME (Must be same as on Statement of Organization)	
Wayne County Democratic Central Committee	īe .

	T			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-22-09	CK# 8 7 0	Wayne Co. Fair Board P.O. Box 167 Conydon, Da. 50060	Renewal of our ad on Co. Fair Sponsors sign	\$40.00
6-16-09	ID# CK# &//	Cash	forthange to be used at Summer on Square food sale	60.00
6-21-09	ID# CK# <i>81</i> 2	Congdon Comm. Bettermi C/O Bill Gode 4075. Lingoln Congdon, Ja. 50060	t for ice Cream we served at Son Square. They had some left from previous beeck.	36.00
G-23-09	ID# CK# 8/3	Southern Jown Oil ongrience Stone 614 M. Defferson Conydon Ja. 50060	additional purchase of ice creamfor Son Square	25,68
6-24-09	ID# CK# <i>814</i>	Nan White 1677 Huy J 22 Humeston Ba 50123	reimbursement for meat, beens, chips for Summer on Square	152,23
6-25-09	ID# CK# <i>815</i>	Wayne Co. Fair Board P. O. Box 167 Conydon, Ja. 50060	Booth space for Democrat publicity at Co. Fair	36,00
7-14-09		City of Conydon 20\$ S. East St. Conydon, Ja. 50060	Reutal of Walden Park Clubhouse for Fall Fund raiser dinner	50.00
7-17-09	id# ck# <i>817</i>	Wayre Co. Newspapers P. O. Box 258 205W. Jacker Corydon, Sa. 50060	Ads for 2 who for Old Settleri BakeSale	10.00
		·	SUB-TOTAL	\$409,91

SUB-TOTAL
TOTAL (if last page of this schedule)

\$409,91

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of _	<i>~</i>	

Reset Form	Address on the same	
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	L/CZC	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAM	E (Must b	e same .	as on	Statement	of Orga	nization)

	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	1
DATE EXPENDED	ID NUMBER	EXPENDITURE	(DESCRIBE TRANSACTION)	AMOUNT EXPENDED
(MM/DD/YR)	(if applicable) AND PAC	(Disbursement) WAS MADE	Í	
	CHECK			
	NUMBER ID#			
0100	10#	Cash	Chause for use at	
8-6-09	CK# 8/8	Cash	Change for use at annual O.S. Dem. Bake	
			Sale	\$ 50,00
	ID#	Dean Costa		
11-24-09	0.00	alean Cox Memoriel Fund 404 S. De Kall Conydon, Ja. 50060	In honor of Dean Cox, long-time democrat activist and 10+ years Co. Chair.	25.00
•	ск#819	1. 1. 1 all	and in + wears Ca Chaire	25.00
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SUB-TOTAL

TOTAL (if last page of this schedule)

484.91

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	_2	of	2	
		''		

COMMIT	TEE NAME (Must b	oe same as on Statement	of Organization)	
91	α	Democratic	<u> </u>	^
pra.	me County	Demorratio	Contral	Committee
		- Too our	_envince	

SCHEDULE					
E	IN KIND				
(Rev. 06/97)	CONTRIBUTIONS				
CHECK THIS BOX IF AMENDING FORM					

DATE					
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
8/6/09	Unitemized Contributions from 6 individuals		10 pans of brownier@ \$5 each	\$ 50.00	
8-6-09	Uniterrized Contributions from 8 individuals -		12 dozen asskies @ \$ 3,50 dozen	42.00	
8-6-09	Uniterized contributions from 5 individuals		8 pies @ \$8 each	64,00	/
8-6-09	Uniterrized contributions from 3 individuals		flormen of whether the form rolle	30.00	V
	Unitering Contributions from I individual		2 dozen besegis ± 4 jars \$3 thatfark jam	22.00	/
	Unitemized Contributions from 4 individuals		4 bundt Caker @ 4 6	24.00	~
8-6-09	Uniterrized contributions from 2 individuals		1 Coffeecake@ 64; 1 monkey bread@ 85	9.00	/
	Uniterized Contributions from 4 Individuals	/	O loaves af various fruit quick breads @ 64	40,00	✓
8-6-09	Uniterized contentations of fresh fruit & regetable produce from 4 individual	ė	pha fresh blackberries & 6; assorted constant, quest.	23,50	V
8-6-09	Uniterized contribution of homemode counsed selsa		3 pints of salse @	12.00	V
			SUB-TOTAL	\$	

TOTAL (if last page of this schedule)

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____